

FEC FORM 2
STATEMENT OF CANDIDACY

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2016 DEC 12 AM 8:51

1. (a) Name of Candidate (in full) <u>David P. Joyce</u>		
(b) Address (number and street) <u>9652 Music St.</u>		2. FEC Candidate Identification Number <u>H20H14064</u>
(c) City, State, and ZIP Code <u>Novelty OH 44072</u>		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
4. Party Affiliation <u>R</u>	5. Office Sought <u>U.S. Rep</u>	6. State & District of Candidate <u>OH - 14</u>

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 election(s).
(year of election)
- NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) <u>Friend of Dave Joyce</u>
(b) Address (number and street) <u>320 Kenarden Rd.</u>
(c) City, State, and ZIP Code <u>Highland Hgt., OH 44143</u>

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.
- NOTE:** This designation should be filed with the principal campaign committee.

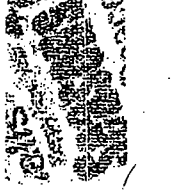
(a) Name of Committee (in full)
(b) Address (number and street)
(c) City, State, and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate <u>David P. Joyce</u>	Date <u>12.01.16</u>
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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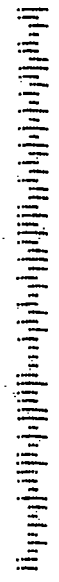
WINN-DIXIE STORE CLEVELAND OH 44115




Friends of Dave Joyce
P.O. Box 516
Painesville, OH 44077

Federal Election Commission
999 E Street NW
Washington, DC 20463

20463-



Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (3/2015)	12/12/16 DATE PREPARED

2016-12-12 00:00:00